16509618301

JUN 1 8 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Alexander J. Eglit

Attorney Docket No.: GENSP103R1

Application No.: 10/720,001

Examiner: Unassigned

Filed: November 20, 2003

Group: 2673

Title: METHOD AND SYSTEM FOR DISPLAYING AN ANALOG IMAGE BY A DIGITAL DISPLAY DEVICE (as amended)

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 703-872-9306 to the O.S. Patent and Trademark Office on

June 8, 2004.

Signed:

PRELIMINARY AMENDMENT

Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Before examination of the subject application, please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims that begin on page 4 of this рарст.

Remarks/Arguments begin on page 25 of this paper.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Alexander J. Eglit

Attorney Docket No.: GENSP103R1

Application No.: 10/720,001

Examiner: Unassigned

Filed: November 20, 2003

Group: 2673

Title: METHOD AND SYSTEM FOR DISPLAYING AN ANALOG IMAGE BY A DIGITAL DISPLAY DEVICE (as amended)

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 703-872-9306 to the U-Syffatent and Trademark Office on

June 8, 2004.

PRELIMINARY AMENDMENT TRANSMITTAL

Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

冈

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	104	MINUS	43	61	x 9 =	x 18 = 1098.00
Independent	8	MINUS	5	3	x 43 =	x 86 = 258.00
Claims Multiple Dependent Claim Present and Fee Not Previously Paid				aly Paid Tota	\$145.00	\$290.00 \$1356.00

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension 冈 be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388. _ to cover the additional ___ in the amount of \$_ Enclosed is our Check No. __ \Box claim fee and/or extension of time fees.

Please charge the required fees (1098.00 for additional claims & 258.00 for additional independent claims), or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. GENSP103R).

Respectfully submitted. BEYER WEAVER & THOMAS, LLP

Michael J. Ferrazano

Reg. No. 44,105 BEST AVAILABLE COPY

P.O. Box 778 Berkeley, CA 94704-0778